



DoubleTree by Hilton Washington, DC – Crystal City
300 Army Navy Drive
Arlington, VA 22202
June 20, 2018

Meeting Summary

FICEMS Members in Attendance

Department of Defense (DoD)

Mark Gentilman, MD, Director of Medical Preparedness Policy

Department of Health and Human Services (HHS)

Edward J. Gabriel, MPA, Deputy Assistant Secretary, ASPR

Theresa Morrison-Quinata, Health Resources and Services Administration

CAPT Richard W. Niska, MD, MPH, Team Lead, Healthcare Preparedness Response Team, Centers for Disease Control and Prevention (CDC)

CAPT Celissa Stephens, RN, MSN, Director, Division of Nursing Services, Indian Health Service (IHS)

Jean Sheil, Director, Emergency Preparedness and Response Operations, Center for Medicare and Medicaid Services (CMS)

Department of Homeland Security (DHS)

G. Keith Bryant, US Fire Administrator

Duane Caneva, MD, Chief Medical Officer

Department of Transportation (DOT)

Heidi King, Deputy Administrator and Acting Administrator, National Highway Traffic Safety Administration (NHTSA)

Federal Communications Commission (FCC)

David Furth, Deputy Bureau Chief, Public Safety and Homeland Security Bureau

State EMS Director

Joe Schmider, Texas State EMS Director

FICEMS Staff in Attendance

Department of Defense (DoD)

Thomas Kirsch, MD, MPH, Director, National Center for Disaster Medicine and Public Health

Department of Health and Human Services (HHS)

Sean Andrews, MPH, Office of the Assistant Secretary for Preparedness and Response (ASPR)

Kevin Yeskey, MD, Principal Deputy Assistant Secretary, ASPR

Department of Homeland Security (DHS)

Ray Mollers, Office of Health Affairs (OHA)

Richard Patrick, Director, National Fire Programs, US Fire Administration

Department of Transportation (DOT)

Dave Bryson (NHTSA)

Jeremy Kinsman (NHTSA)

Jon Krohmer (NHTSA)

Gamunu Wijetunge (NHTSA)

Welcome, Introductions, Opening Remarks

Edward J. Gabriel, MPA, FICEMS Chair

Mr. Gabriel called this meeting of the Federal Interagency Committee on Emergency Medical Services (FICEMS) to order at 2:14pm. He explained that the meeting would be broadcast live online and that Mr. Krohmer and Dr. Yeskey were participating via teleconference.

FICEMS Member Agency Update

State EMS Directors

Joe Schmider, State EMS Director, Texas

Mr. Schmider explained that the Recognition of EMS Personnel Licensure Interstate CompAct (REPLICA) now has 14 member states with 2 additional states likely joining in the next few weeks. This creates a formal pathway for licensed EMS personnel to provide prehospital care across state lines under authorized emergency circumstances.

Mr. Gabriel added that it has been a huge effort to get this legislation passed and it will make a difference in saving lives.

Department of Health and Human Services (HHS)

Theresa Morrison-Quinata, Health Resources and Services Administration

Ms. Morrison-Quinata highlighted one of the nine performance measures of the Health Resources and Administration grant program for children, which provides the infrastructure for the other eight measures. The Institute of Medicine (IOM) emergency care reports recommended that EMS agencies and emergency departments appoint a pediatric emergency care coordinator to provide pediatric leadership. Twenty-three percent of EMS agencies that responded to a survey had a pediatric emergency care coordinator. State Emergency Medical Services for Children (EMSC) program managers will reach out to other EMS agencies to try and increase that number.

Department of Homeland Security (DHS)

Duane Caneva, MD, Chief Medical Officer

Dr. Caneva shared that the DHS has been reorganized and the Office of Health Affairs (OHA) no longer exists. The DHS is investigating the cost and impact of implementing a first responder vaccine initiative. They are exploring the possibility of using the national strategic stockpile of anthrax vaccine that is due to expire to vaccinate emergency responders. The department is also working to transition to a national level campaign for using laypersons to assist in an emergency until EMS arrives.

Department of Health and Human Services (HHS)

CAPT Richard W. Niska, MD, MPH, Team Lead, Healthcare Preparedness Response Team, CDC

CAPT Niska reported that the National Center for Injury and Prevention Control (NCIPC) is working to characterize opioid overdose deaths. Fentanyl is involved in over half of opioid deaths and half of individuals who died tested positive for fentanyl or a fentanyl analogue.

The Office of Public Health Preparedness and Response (OPHPR) published a framework to handle the surge in local and regional EMS use. It focuses on the following four areas: establishing a tiered approach to dispatch; modifying treatment and transport strategies; coordinating transport to alternate destinations (i.e., urgent care clinics, etc); and supporting rapid implementation of patient interventions by EMS.

The CDC continues to consider the most appropriate action in the event of an Ebola Virus Disease (EVD) outbreak in the US.

Review and Approval of Executive Summary of December 2, 2017 Meeting

A motion to approve the summary of the December 2, 2017 FICEMS meeting carried unanimously.

Mr. Gabriel presented the FICEMS letter on Ebola awareness that will be sent out to the EMS community in response to the recent EVD cases in the Democratic Republic of Congo. The letter provides assurance that the risk in the US is currently low and includes website links with additional information. Mr. Gabriel will confirm that the letter coincides with current CDC recommendations and then circulate the letter by email for a final vote by FICEMS members.

A motion to send out the letter to members for vote carried unanimously.

Technical Working Group (TWG) Committee Reports

Mr. Andrews and Dr. Krohmer co-chair the TWG, which is made up of the staff of all FICEMS agencies and other federal agencies. The four TWG committees execute the FICEMS strategic plan and assignments, and report to the TWG. The committee structure was realigned to allow for continuing forward momentum on established FICEMS priorities, accounting for reduced staff availability, and flexibility to address emerging priorities.

Evidence-based Practice and Quality

Mr. Wijetunge read the report provided by the committee co-chair, Diane Pilkey, RN, MPH, EMSC, HRSA. The NHTSA Office of EMS has awarded a Cooperative Agreement to develop an evidence-based guideline for prehospital treatment of suspected opioid overdose to the National Association of State EMS Officials, in partnership with the American College of Emergency Physicians and the National Association of EMS Physicians. The guideline will include recommendations for both patient care and provider safety and is scheduled for completion in March 2019.

The committee is moving forward with the plan to revise the Field Trauma Triage Guidelines. Additionally, two multi-site research concepts that are currently being vetted through the Pediatric Emergency Care Research Network (PECARN) include the effectiveness of EMS Interventions for Pediatric Respiratory Illnesses and Standardized Midazolam Dosing for Pediatric Seizures in EMS.

The committee facilitated publication of the systematic review for the Prehospital Management of Opioid Overdose on the Agency for Healthcare Research and Quality (AHRQ) website and in the *Annals of Emergency Medicine*, several pediatric publications, and two Stop the Bleed publications.

EMS Data and Health Information Exchange

Rachel Abbey, MPH, HHS

Ms. Abbey, who co-chairs this committee with Jeremiah Kinsman, MPH, NHTSA, reported that 35 states and territories submitted their EMS data to the National Emergency Medical Services Information System (NEMSIS). CMS released guidance on June 11, 2018 about how states can use NEMSIS data to help manage the opioid crisis.

NHTSA awarded the Hospital EMS Data Sharing for Trauma fiscal-year-2017 cooperative agreement to the American College of Surgeons, with the National Association of State EMS Officials (NASEMSO) as a collaborative partner. The organization will identify and disseminate best practices in EMS and Hospital data linkage with a planned completion date of Fall 2018.

EMS Systems Integration

Ray Mollers, DHS

Mr. Mollers, who co-chairs this committee with Mr. Wijetunge, reported that many members have been involved with the National Fire Protection Association (NFPA) 3000 Standard for an Active Shooter/Hostile Event Response (ASHER) Program.

The first responder anthrax vaccine initiative will proceed with two to five pilot programs in several states to determine the need or desire for getting the vaccine to first responders. The pilot programs will also help the committee assess the economic feasibility of using the multi-dose vaccine to increase first responder preparedness.

The Model Uniform Core Criteria (MUCC) for Mass Casualty triage addendum to the Instructional Guidelines of the National EMS Education Standards has been published (www.ems.gov), and NHTSA hosted an EMS Focus webinar on MUCC in February 2018, which is archived on YouTube.

Safety, Education and Workforce

Dave Bryson, NHTSA

Mr. Bryson, who co-chairs this committee with Jennifer Marshall, Department of Commerce (DOC), National Institute of Standards and Technology (NIST), reported that the NHTSA Fatigue Risk Management Project is moving into its second and third phases. A series of articles on Phase 1 of the research examining the science behind EMS fatigue was published in 2018 in NASEMSO's official journal, *Prehospital Emergency Care*.

The committee also continues to support NASEMSO in their review and update of the 2007 National EMS Scope of Practice Model, which will be released to the public in the Fall of 2018.

A motion to accept the subcommittee reports with no action items carried unanimously.

Regional Disaster Health Response System

Kevin Yeskey, MD, Principal Deputy Assistant Secretary for Preparedness and Response, ASPR

Dr. Yeskey reported via teleconference that experiences with hospital preparedness during the recent hurricane season identified gaps, particularly related to chemical and infectious disease threats. The ASPR is proposing a new approach to modernize the National Disaster Medical System (NDMS) and update the Hospital Preparedness Program (HPP). It would build regional surge capacity by having regional centers of excellence. This would provide a more regulated, controlled flow of licensed professionals and supplies across states. The process would provide training in chemical, biological, radiological, nuclear, explosives, and Incident Command Systems principles. It also would identify readily deployable specialty and sub-specialty providers. The nationwide process would improve awareness of available resources that could be shared regionally. Centers that were prepared to triage and manage patients during a disaster could receive a 'response ready' designation. The committee continues to look for ways to fund the programs including proposing a Medicare reimbursement of 101% instead of 100%, or tax exempt status for community hospitals that attain the designation. The aim is to find additional funding so that standard medical care is not compromised.

EMS Agenda 2050

Michael Gerber, MPH, Associate Consultant, RedFlash Group

Mr. Gerber reported that the project team has reviewed responses from the FICEMS Request for Information on the EMS Agenda 2050. The contract for the project was awarded to the RedHorse Corporation in September 2017 and Mr. Gerber works for RedFlash, a subcontractor. Mr. Mike Taigman is facilitating the revision process with RedFlash, which is guided by the 10-member Technical Expert Panel (TEP). The team has collected input from the general public, national, state and local conference sessions, webinars and digital outreach programs. The TEP reviewed the public input and submitted an updated draft to NHTSA for FICEMS to review. The goal is to release the final agenda in September 2018 with a National Implementation Forum on how to best implement the agenda over the next few decades (www.EMSagenda2050.org).

Opioid Overdose Epidemic Update

Jeremiah Kinsman, MPH, NHTSA

Mr. Kinsman reported that the rate of naloxone administrations per 1,000 EMS patient encounters in the US rose from 5.67 in Q1 2012 to 10.85 in Q4 2016. The

rate in Q2 2018 was 9.18 using the NEMSIS Version-3-Standard Data. The number of naloxone administrations per patient administered naloxone by EMS has also risen from 1.21 in Q1 2014 to 1.36 in Q2 2018. It is unclear if this represents an increase in opioid potency.

The CMS, National Institute on Drug Abuse (NIDA), CDC and NHTSA, with Substance Abuse and Mental Health Services Administration (SAMHSA) coordination, funded an AHRQ systematic review that was awarded to Oregon Health Sciences University. In November 2017, the full systematic review was published by AHRQ and a summary of the review was published in the *Annals of Internal Medicine*.

Opiate antagonists were incorporated into an update of the 2007 National EMS Scope Practice Model posted online (www.EMS.gov).

A letter sent on June 11, 2018 from CMS to State Medicaid Directors provides guidance on funding opportunities to support health IT related to combatting the opioid crisis. States may use 90/10 Medicaid funding to design, develop and implement IT systems and 75/25 funding for ongoing health IT support (<https://www.medicaid.gov/federal-policy-guidance/downloads/smd19006.pdf>).

Mr. Gabriel highlighted that an aim of the June 11, 2018 letter was to enhance statewide communications so that emergency responders can obtain access to naloxone and save lives in the staggering opioid epidemic.

Mr. Gabriel discussed the draft summary of the Prehospital Trauma Care FICEMS letter approved in December 2017 that was sent to the White House. FICEMS posted an RFI to the Federal Register on April 27, 2018 to gather follow-up input from the community.

Prehospital Trauma Care Request for Information Update

Gamunu Wijetunge, MPM, OEMS, NHTSA

Mr. Wijetunge reported that the comment period posted in the Federal Register will close on July 26, 2018 and comments may be viewed online (www.regulations.gov). FICEMS staff will work with a contractor to publish a summary document of the public comments and present it to FICEMS.

Mr. Gabriel emphasized that the RFI is an opportunity to provide direct feedback to federal leadership around this topic and encouraged participation.

Other Emerging Issues in EMS from Federal Agencies

Mr. Gabriel noted that no items were offered.

Public Comment

Mr. Gabriel thanked the NEMSIS team and others for their excellent work.

He opened public comment by presenting a letter submitted to FICEMS by Dennis Rowe, President, National Association of Emergency Medical Technicians. The letter calls for the development of a nationally-applicable EMS Preparedness Agenda that describes the desired future state of EMS preparedness and outlines the training protocols needed for achieving the desired level of preparedness. FICEMS will discuss the letter and provide an appropriate response.

Mr. Gabriel noted that no audience members requested to speak. He encouraged the public and federal partners to be the eyes and ears of FICEMS in the community and bring important issues to their attention either in person or by submitting input online.

Adjournment

A motion carried unanimously to adjourn the meeting at 3:51pm.